

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Special Operations Speaks PAC - SOS PAC

ADDRESS (number and street)

103 Pamlico Place

☐ Check if different than previously reported. (ACC)

Chocowinity

NC

27817

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00524280

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2014

through

M M M / D D D / Y Y Y Y Y Y
03 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer

Dan Backer

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		76744.63
(b) Cash on Hand at Beginning of Reporting Period.....	76744.63	
(c) Total Receipts (from Line 19)	31306.36	31306.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	108050.99	108050.99
7. Total Disbursements (from Line 31)	24830.53	24830.53
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	83220.46	83220.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	1201.00	1201.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1201.00	1201.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1201.00	1201.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	30105.36	30105.36
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	31306.36	31306.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31306.36	31306.36

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	75.00	75.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	75.00	75.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	24755.53	24755.53
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24830.53	24830.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24830.53	24830.53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1201.00	1201.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1201.00	1201.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	75.00	75.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	75.00	75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 13

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. CAPT Jon C Abeles

Mailing Address 1019 Lenox Place

City State Zip Code
Cincinnati OH 45229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Military

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 01 / 2014

Transaction ID : SA17.29274

Amount of Each Receipt this Period

500.00

Carey Contribution

Full Name (Last, First, Middle Initial)

B. John Elias Albert

Mailing Address 1830 NW Riverscape Street #801

City State Zip Code
Portland OR 97209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

General Management

CES Group LLC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 01 / 2014

Transaction ID : SA17.29270

Amount of Each Receipt this Period

250.00

Carey Contribution

Full Name (Last, First, Middle Initial)

C. Mae E Dawson

Mailing Address P.O. Box 157

City State Zip Code
Fulton TX 78358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Garbage service

The Bag Lady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 26 / 2014

Transaction ID : SA17.29961

Amount of Each Receipt this Period

25.00

Carey Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. David Elliott

Mailing Address PO Box 757

City

Kaufman

State

TX

Zip Code

75142

FEC ID number of contributing
federal political committee.

C

Name of Employer

retireds

Occupation

self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 07 / 2014

Transaction ID : SA17.29406

Amount of Each Receipt this Period

1000.00

Carey Contribution

Full Name (Last, First, Middle Initial)

B. James Flynn

Mailing Address 1016 SW Myrtle Dr.

City

Portland

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 17 / 2014

Transaction ID : SA17.29576

Amount of Each Receipt this Period

250.00

Carey Contribution

Full Name (Last, First, Middle Initial)

C. Cary S. Katz

Mailing Address 9021 Grove Crest Ln

City

Las Vegas

State

NV

Zip Code

89134

FEC ID number of contributing
federal political committee.

C

Name of Employer

College Loan Corp

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

03 / 04 / 2014

Transaction ID : SA17.29975

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Charles Holden Krause

Mailing Address 265 Old Dublin Road

City

Peterborough

State

NH

Zip Code

03458-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

investment adviser

Occupation

self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 06 / 2014

Transaction ID : SA17.29355

Amount of Each Receipt this Period

500.00

Carey Contribution

Full Name (Last, First, Middle Initial)

B. Gary Joe Noble

Mailing Address 8009 CR 6830

City

Lubbock

State

TX

Zip Code

79407

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 05 / 2014

Transaction ID : SA17.29892

Amount of Each Receipt this Period

100.00

Carey Contribution

Full Name (Last, First, Middle Initial)

C. Elaine Susanne Price

Mailing Address 2431 Aloma Ave #124

City

Winter Park

State

FL

Zip Code

32792

FEC ID number of contributing
federal political committee.

C

Name of Employer

physician

Occupation

condono global health systems, LLC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2014

Transaction ID : SA17.29903

Amount of Each Receipt this Period

100.00

Carey Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. William Albert Silva

Mailing Address 24303 Bear Mtn

City

San Antonio

State

TX

Zip Code

78258

FEC ID number of contributing
federal political committee.

C

Name of Employer

CDR, MSC, USN (SEAL) Ret

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA17.29951

Amount of Each Receipt this Period

100.00

Carey Contribution

Full Name (Last, First, Middle Initial)

B. Frederick R Wallenborn

Mailing Address 2720 N. Carr St.

City

Tacoma

State

WA

Zip Code

98403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2014

Transaction ID : SA17.29519

Amount of Each Receipt this Period

500.00

Carey Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

13325.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. DBCS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Mailing Address 717 King Street
Ste. 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
carey account; legal and compliance fee

001

Candidate Name

Category/
Type**Transaction ID : SB29.30023**

Amount of Each Disbursement this Period

2000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. DBCS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		28		2014

Mailing Address 717 King Street
Ste. 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
carey account; legal and compliance fee

001

Candidate Name

Category/
Type**Transaction ID : SB29.30027**

Amount of Each Disbursement this Period

2000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. DBCS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Mailing Address 717 King Street
Ste. 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey account; Consulting

001

Candidate Name

Category/
Type**Transaction ID : SB29.30030**

Amount of Each Disbursement this Period

2000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. Linda Eddy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2014

Mailing Address P.O. BOX 171

Transaction ID : SB29.30029

City	State	Zip Code
Webster City	IA	50595

Amount of Each Disbursement this Period

Purpose of Disbursement
Carey Account: Graphic Design

004

280.00

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. PMI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Mailing Address 406 First St. SE
3rd floor**Transaction ID : SB29.30025**

Amount of Each Disbursement this Period

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Carey account; ConsultingCategory/
Type

5905.83

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. PMI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Mailing Address 406 First St. SE
3rd floor**Transaction ID : SB29.30026**

Amount of Each Disbursement this Period

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Carey account; ConsultingCategory/
Type

5000.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11185.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. PMI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Mailing Address 406 First St. SE
3rd floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Carey account; Consulting

Candidate Name

Category/
Type**Transaction ID : SB29.30028**

Amount of Each Disbursement this Period

4000.00

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. PMI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Mailing Address 406 First St. SE
3rd floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Carey account; Consulting

Candidate Name

Category/
Type**Transaction ID : SB29.30031**

Amount of Each Disbursement this Period

3000.00

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. RallyPirx

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Mailing Address 144 2nd St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Carey account; merchant fees

Candidate Name

003
Category/
Type**Transaction ID : SB29.30047**

Amount of Each Disbursement this Period

50.00

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7050.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Special Operations Speaks PAC - SOS PAC

Full Name (Last, First, Middle Initial)

A. RallyPirx

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Carey account; merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SB29.30048

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. RallyPirx

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Carey account; merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SB29.30049

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. RallyPirx

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Carey account; merchant fees

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SB29.30050

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

24435.83
